

08-09-01

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

| | | | |
|---|---------------|-----------------|---|
| Attorney Docket No. | 4-218 | Total Pages | 2 |
| First Named Inventor or Applicant Identifier | | Cutler, Willard | |
| Title THERMALLY CONDUCTIVE HONEYCOMBS FOR CHEMICAL REACTORS | | | |
| Express Mail Label No. | EL689101888US | | |

ADDRESS TO:
Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

| | |
|---|---|
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (Submit an original and a duplicate for fee processing) | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) | 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) |
| - Descriptive title of the Invention | a. <input type="checkbox"/> Computer Readable Copy |
| - Cross References to Related Applications | b. <input type="checkbox"/> Paper Copy (identical to computer copy) |
| - Statement Regarding Fed sponsored R&D | c. <input type="checkbox"/> Statement verifying identity of above copies |
| - Reference to Microfiche Appendix | |
| - Background of the Invention | |
| - Brief Summary of the Invention | |
| - Brief Description of the Drawings (if filed) | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 3. <input type="checkbox"/> Drawing(s) (35 U.S.C. § 113) | [Total Sheets] <input type="text" value="16"/> |
| 4. <input type="checkbox"/> Oath or Declaration | [Total Pages] <input type="text" value="16"/> |
| a. <input type="checkbox"/> Newly executed (original or copy) | 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) | 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | 9. <input type="checkbox"/> English Translation Document (if applicable) |
| | 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations |
| | 11. <input type="checkbox"/> Preliminary Amendment |
| | 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) |
| | 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) |
| | 15. <input type="checkbox"/> Other: |

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: 08/

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 22928 or Correspondence address below

| | | | | | |
|-------------------|---------------------------------|-----------------------------------|----------------|----------|----------------|
| NAME | Kees van der Sterre | | | | |
| ADDRESS | Corning Incorporated, SP-TI-3-1 | | | | |
| CITY | Corning | STATE | NY | ZIP CODE | 14831 |
| COUNTRY | USA | TELEPHONE | (607) 974-3294 | FAX | (607) 974-3848 |
| Name (Print/Type) | Kees van der Sterre | Registration No. (Attorney/Agent) | 25,938 | | |
| Signature | Kees van der Sterre | | Date | 8/8/2001 | |

FEE TRANSMITTAL
for FY 2000

| | | | |
|---------------------------------------|-----------------|------------------------|-----------------|
| Fee Transmittal for FY 2000 | | Complete if Known | |
| | | Application Number | |
| | | Filing Date | |
| | | First Named Inventor | Cutler, Willard |
| | | Examiner Name | |
| | | Group / Art Unit | |
| TOTAL AMOUNT OF PAYMENT | (\$) 710 | Attorney Docket Number | SP01-218 |

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number 03-3325

Deposit
Account
Name

Charge Any Additional Fees Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. Payment Enclosed:

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Fee | Fee | Fee Description | Fee Paid |
|--------------|------|-----|-----------------|----------|
| Code | (\$) | | | |

| | | | |
|-----|-----|------------------------|-----|
| 101 | 710 | Utility filing fee | 710 |
| 106 | 320 | Design filing fee | |
| 107 | 490 | Plant filing fee | |
| 108 | 710 | Reissue filing fee | |
| 114 | 150 | Provisional filing fee | |

SUBTOTAL (1) (\$710)

2. EXTRA CLAIM FEES

Extra Fee from
Claims below = Fee Paid

Independent Claims 2 - 3 = 0 x = 0

Multiple Dependent =

***or number previously paid, if greater: For Re-*

Large Entity

| Large Entity | Fee | Fee | Fee Description |
|--------------|-----|-----|-----------------|
|--------------|-----|-----|-----------------|

| | | |
|------|------|---|
| Code | (\$) | |
| 103 | 18 | Claims in excess of 20 |
| 102 | 80 | Independent claims in excess of 3 |
| 104 | 270 | Multiple dependent claim, if not paid |
| 109 | 80 | ** Reissue independent claims over original patent |
| 110 | 18 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) **(\$)** 0

SUBMITTED BY

Completed (if applicable)

| | | | |
|-------------------|---|-----------------------------------|----------|
| Name (Print/Type) | Kees van der Sterre | Registration No. (Attorney/Agent) | 25,938 |
| Signature |  | Date | 8/8/2001 |

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** **(\$)** 0